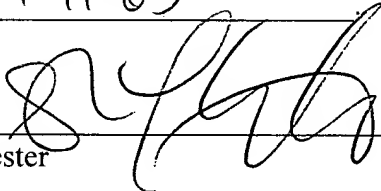


## CERTIFICATE OF MAILING

I hereby certify that the below listed items are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to:

**Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450**

on 4-11-05  
  
\_\_\_\_\_  
Jeffrey R. Kuester

In Re Application of:

Jerding, et al.

Serial No.: 09/590,904

Filed: June 9, 2000

Confirmation No.: 1598

Group Art Unit: 2614

Examiner: Shang, Annan Q.

Docket No.: A-6585 (191930-1180)

For: **Program Information Searching System for Interactive Program Guide**

The following is a list of documents enclosed:

Return Postcard  
RCE Transmittal  
Amendment Transmittal  
Fee Transmittal  
Credit Card Authorization - Authorizing \$790.00  
Response and Amendment to Final Office Action

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

# AMENDMENT TRANSMITTAL LETTER (LARGE)

Applicant(s): Jerding, et al.

Docket No.

A-6585 (191930-1180)

Serial No.  
09/590,904

Filing Date  
June 9, 2000

Examiner  
Shang, Annan Q.

Confirmation No.  
1598

Group Art Unit  
2614

Invention: **Program Information Searching System for Interactive Program Guide**

**Commissioner for Patents**  
**Mail Stop RCE**  
**P.O. Box 1450**  
**Alexandria VA 22313-1450**


Transmitted herewith is a Response and Amendment to Final Office Action and RCE in the above-identified application.

The fee has been calculated and is transmitted as shown below

## CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	61 -	62 =	0	X \$50.00	\$0
INDEP. CLAIMS	2 -	3 =	0	X \$200.00	\$0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$360.00
EXTENSION FEE	1 <sup>ST</sup> MONTH <input type="checkbox"/> \$120.00	2 <sup>ND</sup> MONTH <input type="checkbox"/> \$450.00	3 <sup>RD</sup> MONTH <input type="checkbox"/> \$1,020.00	4 <sup>TH</sup> MONTH <input type="checkbox"/> \$1,590.00	\$0
Other Fees: RCE					\$790.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$790.00

- ☐ No additional fee is required.
- ☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_. A duplicate copy of this page is enclosed.
- ☐ A check in the amount of \_\_\_\_\_ to cover the filing fee is enclosed.
- ☒ A Credit Card Payment Form PTO-2038 is attached in the amount of \$790 (for RCE).
- ☒ The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.

  
Jeffrey R. Kuester, Reg. No. 34,367

4-11-05  
Date